

Bupa Hospital Covers

# What you need to know at a glance



Bupa 



This guide is for the use of hospital staff and providers only and does not contain all product information. Detailed product information can be found at:

[www.bupa.com.au/retail-info](http://www.bupa.com.au/retail-info) for retail hospital covers  
[www.bupa.com.au/corporate-info](http://www.bupa.com.au/corporate-info) for corporate hospital covers  
[www.bupa.com.au/visitors-info](http://www.bupa.com.au/visitors-info) for visitors hospital covers  
[www.bupa.com.au/oshc-info](http://www.bupa.com.au/oshc-info) for student hospital covers

Please note there is some important changes to this document including:

- **OTHER ARRANGEMENTS** — Bupa Australia administers overseas visitors cover and overseas student health cover insurance products issued by other entities for, respectively, overseas visitors and overseas students. Where Bupa has negotiated a Hospital Agreement with a Hospital Provider, the benefits are applicable to such persons.

Please also note this guide is subject to change without notice.

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# Contents

<b>Retail hospital covers at a glance</b>	<b>4</b>
<b>Corporate hospital covers at a glance</b>	<b>18</b>
<b>Visitors hospital covers at a glance</b>	<b>22</b>
<b>New Bupa membership cards</b>	<b>27</b>
<b>Bupa global membership cards</b>	<b>28</b>
<b>Pre-authorisation hospital checks for Bupa global members</b>	<b>29</b>

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## Product summary table

<b>Old hospital name</b>	<b>New name</b>	<b>Page</b>
Hospital Value \$1000 Excess	Advantage Hospital \$1000 Excess	<b>4</b>
Hospital Select Value \$250 Excess	Budget Hospital \$250 Excess	<b>5</b>
Hospital Select Value \$500 Excess	Budget Hospital \$500 Excess	<b>5</b>
Hospital Saver	Budget Hospital \$500 Excess	<b>5</b>
Hospital Select Value \$1000 Excess	Budget Hospital \$1000 Excess	<b>6</b>
Hospital Select Plus \$250 Excess	Standard Hospital \$250 Excess	<b>14</b>
Hospital Select Plus \$500 Excess	Standard Hospital \$500 Excess	<b>14</b>
Hospital Saver Plus Level 2	Standard Hospital \$250 Excess	<b>14</b>
Hospital Saver Plus Level 5	Standard Hospital \$500 Excess	<b>14</b>
Hospital Saver Plus Level 3	Standard Hospital \$250 Excess	<b>14</b>
Hospital Saver Plus Level 4	Standard Hospital \$250 Excess	<b>14</b>
Hospital Select Plus \$1000 Excess	Standard Hospital \$1000 Excess	<b>15</b>
Advantage Hospital with co-payment	Top Hospital - with co-payment	<b>16</b>
Hospital Plus	Top Hospital - with co-payment	<b>16</b>
Premium Hospital	Top Hospital - no excess	<b>16</b>
Hospital Super Plus	Top Hospital - no excess	<b>16</b>
Hospital Saver Plus Nil Excess	Top Hospital - no excess	<b>16</b>
Advantage Hospital \$250 Excess	Top Hospital \$250 Excess	<b>16</b>
Hospital Value \$250 Excess	Top Hospital \$250 Excess	<b>16</b>
Hospital Cover with Excess Bonus	Top Hospital \$250 Excess	<b>16</b>
Advantage Hospital \$500 Excess	Top Hospital \$500 Excess	<b>16</b>
Hospital Value \$500 Excess	Top Hospital \$500 Excess	<b>16</b>
Hospital Cover with Excess Level 5	Top Hospital \$500 Excess	<b>16</b>

## Retail hospital covers at a glance

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

	Active Saver (Packaged)	Advantage Hospital \$1,000 Excess & Hospital Value \$1,000 Excess*
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees – only for accidents requiring urgent medical attention and the services included below. All other services that are not excluded receive Minimum Benefits for shared room accommodation.</p> <p><b>Public Hospitals:</b> For Accidents requiring urgent medical attention and the services listed below. Shared room accommodation as set by the Australian Government plus a fixed add on benefit for a private overnight room for included services. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>Inclusions:</p> <ul style="list-style-type: none"> <li>• Knee arthroscopy and meniscectomy procedures</li> <li>• Appendicitis</li> <li>• Removal of tonsils and adenoids</li> <li>• Dental surgery (specific items only)</li> <li>• Minor gynaecological surgery (not including laparoscopy)</li> </ul>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	N/A	<p>\$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	<p>\$100 a day (including overnight and day services in private and public hospitals), up to a maximum of \$500 per hospital stay.</p> <p>The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services other than the services listed above and exclusions pay minimum benefits</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered – contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Value \$1000 Excess was renamed Advantage Hospital \$1000 Excess effective 1 April 2012.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Basic Hospital \$250 and \$500 Excess	Budget Family Cover (Packaged)
	On Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for accidents requiring urgent medical attention and services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefits services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Psychiatric services</li> <li>• Rehabilitation</li> <li>• Palliative Care</li> </ul>	<ul style="list-style-type: none"> <li>• For the duration of this cover:</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure</li> <li>• Psychiatric services*</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cardiac &amp; related services</li> <li>• Pregnancy (including Childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• All Joint Replacements</li> <li>• Dialysis for chronic renal failure</li> <li>• Cataract and eye lens procedures</li> <li>• Obesity/Metabolic related procedures/surgery (including, but not limited to Gastric Banding, Gastric Sleeve, Gastric Bypass, Gastric Balloon and other weight loss procedures, etc)</li> <li>• Spinal Fusion</li> <li>• Back Surgery (including Spinal Surgery)</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• All cosmetic surgery (whether or not it is clinically required)</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Select Value \$250 & \$500 Excess was renamed Budget Hospital \$250 & \$500 excess respectively, effective 1 April 2013.

\*\*Hospital Saver was renamed Budget Hospital \$500 Excess effective 1 April 2014.

\*Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Budget Hospital (Incorporating Hospital Select Value \$250 & \$500 Excess & Hospital Saver)*	Budget Hospital & Hospital Select Value \$1,000 Excess*
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefits services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	<p>\$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits</b> (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure<sup>#</sup></li> <li>• Psychiatric services<sup>^</sup></li> <li>• Gastric banding and obesity related services</li> <li>• Abdominoplasty and lipectomy</li> <li>• Surgery by Podiatrists</li> </ul> <p><sup>#</sup> Dialysis only attracts minimum benefits if the member joined on or after 1 April 2006</p>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Psychiatric services<sup>^</sup></li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions</b> (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cardiac and cardiac-related services</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• All joint replacements including arthroplasty revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure<sup>#</sup></li> <li>• Gastric banding and all obesity related services</li> <li>• Abdominoplasty and lipectomy</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul> <p><sup>#</sup> Dialysis is an exclusion if the member joined Budget Hospital \$1000 Excess on or after 1 April 2006</p>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only. Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

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<sup>^</sup>Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Choices (Packaged)	Established Family Cover
	Off Sale Product (Effective 1 June 2016)	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees — only for accidents requiring urgent medical attention and the services included below. All other services that are not excluded receive Minimum Benefits for shared room accommodation.</p> <p><b>Public Hospitals:</b> For Accidents requiring urgent medical attention and the services listed below. Shared room accommodation as set by the Australian Government plus a fixed add on benefit for a private overnight room ** for included services. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>Inclusions:</p> <ul style="list-style-type: none"> <li>• Knee arthroscopy and meniscectomy procedures</li> <li>• Appendicitis</li> <li>• Removal of tonsils and adenoids</li> <li>• Dental surgery (specific items only)</li> <li>• Ankle arthroscopy and ankle ligament repair</li> <li>• Shoulder arthroscopy and selected minor shoulder procedures</li> </ul>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services other than the services listed above and exclusions pay minimum benefits</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cardiac and cardiac-related services</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• All joint replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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Excess applies to in-patients only.

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## Retail hospital covers at a glance

	Family Essentials	Family First (Packaged)
	Off Sale Product (Effective 1 June 2016)	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals</b>  <b>Children:</b> Cover for hospital accommodation at shared room benefit (no private room add on payable), theatre fees and ICU, except excluded services. Nil benefits for excluded services.  <b>Adults:</b> For accidents requiring urgent medical attention: Cover for hospital accommodation at shared room (ie no private room add on payable) and theatre fees except for minimum benefit or excluded services. All other services that are not excluded receive shared room minimum benefits only. Nil benefit for excluded services.  <b>Public Hospitals</b>                      All services that are not excluded receive shared room minimum benefits. Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit is not applicable for minimum benefit services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.  <b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	N/A	<p>\$250, \$500, or \$1000 per hospital admission (including overnight and day services in private and public hospitals). Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.                      The excess does not apply to any child dependant covered on the membership.                      The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	<p>\$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay. A co-payment does not apply to any child dependant covered on the membership. The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:  <b>Adults:</b></p> <ul style="list-style-type: none"> <li>All services for adults are paid at minimum benefits shared room accommodation as set by the Australian Government other than accidents. Private room add on benefit not applicable.</li> <li>Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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## Retail hospital covers at a glance

	Growing Family Cover (Packaged)	Healthsmart Diamond (Packaged)
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room add on benefit) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	<p>\$250, \$500, or \$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couple or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	<p>\$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay.</p> <p>The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Healthsmart Gold (Packaged)	Healthsmart (Packaged)
	Off Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250, \$500, or \$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couple or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	<p>\$250, \$500, or \$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples membership when amount is met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> <li>• Gastric banding and all obesity related services</li> <li>• Abdominoplasty and lipectomy</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered – contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Cover with Excess Bonus was renamed Top Hospital Cover \$250 Excess from 1 June 2013. Refer to Top Hospital cover for details.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Hospital Cover With Excess Bonus Plus	Hospital Cover With Excess* (Level 4)
	Off Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$200 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount is met in full.</p> <p>The excess will not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p> <p>Existing dollar amounts under the previous Excess Bonus dollar scheme may be used towards any additional excess.</p>	<p>\$400 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount is met in full.</p> <p>The excess will not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Cover with Excess Level 5 was renamed Top Hospital \$500 Excess effective 1 April 2013. Refer to Top Hospital Cover for details.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Hospital Economy Cover	Hospital Economy Cover With Excess Bonus
	Off Sale Product	Off Sale Product
Hospital Cover	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
Excess	<p>\$400 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount is met in full.</p> <p>The excess will not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p> <p><b>Excess Bonus Dollars:</b> Existing dollar amounts under the previous Excess Bonus dollar scheme may be used towards any excess.</p>	<p>\$400 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount is met in full.</p> <p>The excess will not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p> <p><b>Excess Bonus Dollars:</b> Existing dollar amounts under the previous Excess Bonus dollar scheme may be used towards any excess.</p>
Co-Payment	<p>\$40 a day (including overnight and day services in private and public hospitals), up to a maximum of \$200 per hospital stay.</p> <p>The co-payment will not apply to any child dependant covered on the membership.</p> <p>The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
Minimum Benefits (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
Exclusions (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
Waiting Periods	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Cover with Excess Level 5 was renamed Top Hospital \$500 Excess effective 1 April 2013. Refer to Top Hospital Cover for details.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Live Well	Prime Plus	Public Hospital
	Off Sale Product (Effective 1 June 2016)	On Sale Product (Effective 1 June 2016)	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room ** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>All hospitals:</b> Minimum benefits for shared room accommodation as set by the Australian Government.</p>
<b>Excess</b>	<p>Nil, \$250 and \$500 options. Applies per hospital admission including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per person, twice per couples membership when amount has been paid in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	<p>Nil, \$250 and \$500 options. Applies per hospital admission including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per person, twice per couples membership when amount has been paid in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	N/A
<b>Co-Payment</b>	N/A	N/A	N/A
<b>Minimum Benefits</b> (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Dialysis for chronic renal failure</li> <li>• Gastric banding and all obesity related services</li> <li>• Abdominoplasty and lipectomy</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services when in private hospitals</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions</b> (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Gastric banding and all obesity related services</li> <li>• Abdominoplasty &amp; lipectomy</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Hospital Saver was renamed Budget Hospital \$500 excess from 1 April 2014. Refer to Budget Hospital for details.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Simple Start (Packaged)	Singles Choice Saver (Packaged)
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees — only for accidents requiring urgent medical attention and the services included below. All other services that are not excluded receive Minimum Benefits for shared room accommodation.</p> <p><b>Public Hospitals:</b> For Accidents requiring urgent medical attention and the services listed below. Shared room accommodation as set by the Australian Government plus a fixed add on benefit for a private overnight room **. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>Inclusions:</p> <ul style="list-style-type: none"> <li>• Knee arthroscopy and meniscectomy procedures</li> <li>• Appendicitis</li> <li>• Removal of tonsils and adenoids</li> <li>• Dental surgery (specific items only)</li> <li>• Minor gynaecological surgery (not including laparoscopy)</li> </ul>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees — only for accidents requiring urgent medical attention and the services included below. All other services that are not excluded receive Minimum Benefits for shared room accommodation.</p> <p><b>Public Hospitals:</b> For Accidents requiring urgent medical attention and the services listed below. Shared room accommodation as set by the Australian Government plus a fixed add on benefit for a private overnight room **. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>Inclusions:</p> <ul style="list-style-type: none"> <li>• Knee arthroscopy and meniscectomy procedures</li> <li>• Appendicitis</li> <li>• Removal of tonsils and adenoids</li> <li>• Dental surgery (specific items only)</li> <li>• Minor gynaecological surgery (not including laparoscopy)</li> </ul>
<b>Excess</b>	<p>\$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services other than the services listed above and exclusions pay minimum benefits</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services other than the services listed above and exclusions pay minimum benefits</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Select Plus \$250 & \$500 Excess was renamed Standard Hospital \$250 & \$500 Excess effective 1 April 2013.

Hospital Saver Plus Level 2 was renamed Standard Hospital \$250 Excess effective 1 June 2013.

Hospital Saver Plus Level 5 was renamed Standard Hospital \$500 Excess effective 1 April 2013.

Hospital Saver Plus Level 3 was renamed Standard Hospital \$250 Excess effective 1 April 2014.

Hospital Saver Plus Level 4 was renamed Standard Hospital \$250 Excess effective 1 April 2015.

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Standard Hospital & Hospital Select Plus \$250 & \$500 Excess*	Standard Hospital \$1,000 Excess & Hospital Select Plus \$1000 Excess*
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room ** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount is met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	<p>\$1000 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Cataract and eye lens procedures</li> <li>Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>Dialysis for chronic renal failure<sup>#</sup></li> <li>IVF and assisted reproductive services</li> <li>Surgery by Podiatrists</li> </ul> <p><sup>#</sup> Dialysis only attracts minimum benefits if the member joined on or after 1 April 2006</p>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Cataract and eye lens procedures</li> <li>All joint replacements including arthroplasty, revisions and resurfacing procedures</li> <li>IVF and assisted reproductive services</li> <li>Dialysis for chronic renal failure<sup>#</sup></li> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul> <p><sup>#</sup> Dialysis only attracts minimum benefits if the member joined on or after 1 April 2006</p>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\*Hospital Select Plus \$1000 Excess was renamed Standard Hospital \$1000 Excess effective 1 April 2012.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Start N Save	Top Hospital No Pregnancy \$250 and \$500 Excess
	Off Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. Private room** add on benefit not applicable for minimum benefit services. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p> <p><b>Excess Bonus Dollars:</b> Existing dollar amounts under the previous Excess Bonus dollar scheme may be used towards any additional excess.</p>	<p>For the excess options: \$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	<p>\$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay.</p> <p>The co-payment does not apply to any child dependant on the membership.</p> <p>The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
<b>Minimum Benefits</b> (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions</b> (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including Childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Obesity/Metabolic related procedures/surgery (including, but not limited to Gastric Banding, Gastric Sleeve, Gastric Bypass, Gastric Balloon and other weight loss procedures, etc)</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered – contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

\* Top Hospital Cover has 4 levels:

- Top Hospital Cover – no excess or co-payment (includes previously named Premium Hospital, Hospital Super Plus & Hospital Saver Plus Nil Excess)
- Top Hospital Cover with Co-payment (includes previously named Advantage Hospital with Co-payment & Hospital Plus)
- Top Hospital Cover with \$250 Excess (includes previously named Advantage Hospital \$250 Excess, Hospital Value \$250 Excess and Hospital Cover with Excess Bonus)
- Top Hospital Cover with \$500 Excess (includes previously named Advantage Hospital \$500 Excess, Hospital Value \$500 Excess and Hospital Cover with Excess Level 5)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.



## Retail hospital covers at a glance

	Top Hospital Cover (Now Incorporating Advantage Hospital, Hospital Plus, Hospital Value, Hospital Super Plus, Hospital Saver Plus Nil Excess, Hospital Cover With Excess Bonus, Hospital Cover Excess Level 5 & Premium Hospital)*	Ultimate Health Cover (Packaged)
	On Sale Product	On Sale Product
Hospital Cover	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p>Ultimate Health Cover members charged a fixed daily fee by any of our contracted fixed fee hospitals will be reimbursed or have the fee paid directly to the hospital.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>In addition this product covers laser eye procedures used to adjust the eyeball to correct sight (excludes laser procedures involving lens implants). Only at Bupa approved centres.</p>
Excess	<p>For the excess options: \$250 or \$500 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
Co-Payment	<p>For the co-payment option: \$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay.</p> <p>The co-payment does not apply to child dependants on the membership.</p> <p>The co-payment does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
Minimum Benefits (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
Exclusions (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
Waiting Periods	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• 12 months laser eye correction for a pre-existing condition (excludes lens implant for eye correction)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prosthesis List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

\*\*The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Retail hospital covers at a glance

	Young Singles/Couples Choice (Packaged)	Young Singles/Couples Saver (Packaged)
	On Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees — only for accidents requiring urgent medical attention and the services included below. All other services that are not excluded receive Minimum Benefits for shared room accommodation.</p> <p><b>Public Hospitals:</b> For Accidents requiring urgent medical attention and the services listed below. Shared room accommodation as set by the Australian Government plus a fixed add on benefit for private overnight room **. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>Inclusions:</p> <ul style="list-style-type: none"> <li>• Knee arthroscopy and meniscectomy procedures</li> <li>• Appendicitis</li> <li>• Removal of tonsils and adenoids</li> <li>• Dental surgery (specific items only)</li> <li>• Minor gynaecological surgery (not including laparoscopy)</li> </ul>
<b>Excess</b>	N/A	N/A
<b>Co-Payment</b>	\$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay. The co-payment does not apply on admissions for services with a minimum benefit, and for approved private hospital ambulatory/day programs.	\$50 a day (including overnight and day services in private and public hospitals), up to a maximum of \$250 per hospital stay. The co-payment does not apply on admissions for services with a minimum benefit, and for approved private hospital ambulatory/day programs.
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cardiac and cardiac-related services</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Psychiatric services</li> <li>• Gastric banding and all obesity related services</li> <li>• Abdomnioplasty and lipectomy</li> <li>• Dialysis for chronic renal failure</li> <li>• Rehabilitation services</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• All services other than the services listed above and exclusions pay minimum benefits</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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Excess and Co-payments applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

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## Corporate hospital covers at a glance

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

Please note some companies cover the cost of the excess on behalf of their employees on selected corporate covers. In this situation, we will confirm to you if the excess should be charged when you conduct an eligibility check.

	Corporate Hospital Cover	Corporate Hospital Intermediate
	On Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>
<b>Excess</b>	<ul style="list-style-type: none"> <li>Level 1 - Nil Excess</li> <li>Level 2 - \$250 per hospital admission for adults</li> <li>Level 3 - \$500 per hospital admission for adults</li> </ul> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	<ul style="list-style-type: none"> <li>Level 1 - Nil Excess</li> <li>Level 2 - \$250 per hospital admission for adults</li> <li>Level 3 - \$500 per hospital admission for adults</li> </ul> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits</b> (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Hip and knee replacement including revisions and resurfacing procedures</li> <li>Cataract and eye lens procedures</li> <li>Surgery by Podiatrists</li> <li>IVF &amp; assisted reproductive services</li> </ul>
<b>Exclusions</b> (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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Excess applies to in-patients only.

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A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Corporate hospital covers at a glance

	Corporate Hospital Saver	Corporate Hospital Top
	Off Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>
<b>Excess</b>	<ul style="list-style-type: none"> <li>• Level 1 - Nil Excess</li> <li>• Level 2 - \$250 per hospital admission</li> <li>• Level 3 - \$500 per hospital admission</li> </ul> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per person, twice per couples or family membership when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	<ul style="list-style-type: none"> <li>• Level 1 - Nil Excess</li> <li>• Level 2 - \$250 per hospital admission for adults</li> <li>• Level 3 - \$500 per hospital admission for adults</li> </ul> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per adult when amount has been met in full. The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits</b> (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Psychiatric services<sup>^</sup></li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including revisions and resurfacing procedures</li> <li>• Gastric banding &amp; all obesity related services</li> <li>• Abdominoplasty and lipectomy</li> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions</b> (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

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Excess applies to in-patients only.

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Surgically implanted prostheses up to the approved benefit in the Government's Protheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

<sup>^</sup>Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Corporate hospital covers at a glance

	Healthlink Advantage/ Classic/Essentials Plus (Packaged)	Healthlink Hospital
	On Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>
<b>Excess</b>	<p>\$0, \$250, \$500, or \$1000 capped at once per person, twice per membership per calendar year when amount has been met in full.</p> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>No excess for any child dependant on HealthLink Advantage only.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	<p>\$0, \$250, \$500, or \$1000 capped at once per person, twice per membership per calendar year when amount has been met in full.</p> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Excess Bonus (Excess Waiver)</b>	N/A	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Minimum Benefits)</b>	<p>For the first 24 months:</p> <ul style="list-style-type: none"> <li>Hip and knee replacement including revisions and resurfacing procedures (except where they are required as a result of an accident which occurs after the cover commenced)</li> <li>Cataract and eye lens procedures</li> <li>Dialysis for chronic renal failure</li> <li>IVF and assisted reproductive services</li> <li>Bone marrow transplants</li> <li>All psychiatric conditions (except eating disorders and post natal depression)</li> </ul> <p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>	<p>For the first 24 months:</p> <ul style="list-style-type: none"> <li>Hip and knee replacement including revisions and resurfacing procedures (except where they are required as a result of an accident which occurs after the cover commenced)</li> <li>Cataract and eye lens procedures</li> <li>Dialysis for chronic renal failure</li> <li>IVF and assisted reproductive services</li> <li>Bone marrow transplants</li> <li>All psychiatric conditions (except eating disorders and post natal depression)</li> </ul> <p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

## Corporate hospital covers at a glance

	Mining And Resources Health Cover	Ultimate Corporate Health Cover (Packaged)
	On Sale Product	Off Sale Product
Hospital Cover	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees except for Minimum Benefit and Excluded services.</p> <p>Ultimate Corporate Health Cover members charged a fixed daily fee by any of our contracted fixed fee hospitals will be reimbursed or have the fee paid directly to the hospital.</p> <p><b>Public Hospitals:</b> Minimum benefit for shared room accommodation as set by the Australian Government. All other services that are not excluded receive shared room minimum benefits. Nil benefit for excluded services.</p> <p>In addition this product covers laser eye procedures to correct sight (excludes laser procedures involving lens implants). Only at Bupa approved centres.</p>
Excess	<ul style="list-style-type: none"> <li>Level 1 - Nil Excess</li> <li>Level 2 - \$250 per hospital admission for adults</li> </ul> <p>Excess payable including overnight and day services in private and public hospitals.</p> <p>Capped each calendar year at once per adult when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	N/A
Co-Payment	N/A	N/A
Minimum Benefits (Shared Room Minimum Benefits)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Surgery by Podiatrists</li> </ul>
Exclusions (No Benefits Apply)	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>Cosmetic surgery that is not clinically required</li> </ul>
Waiting Periods	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>2 month initial, palliative care, psychiatric and rehabilitation services</li> <li>12 months pre-existing condition</li> <li>12 months pregnancy (including childbirth)</li> <li>12 months laser eye correction for a pre-existing condition (excludes lens implant for eye correction)</li> <li>No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>

Bupa Medical Gap Scheme benefits apply to in-patient or same day patients only.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prosthesis List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; holds one single sized bed; and has a dedicated ensuite.

# Visitors hospital covers at a glance

## Non-working Visa

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

	Advantage Visitors Cover	Guardian Plus Visitors Cover
	Off Sale Product	Off Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. For Minimum Benefit services, reduced amount equivalent to shared room benefit for Australian resident. Nil benefit for Excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> For Minimum benefit services shared room accommodation only.</p>
<b>Excess</b>	N/A	<p>\$300 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult, when amount has been met in full. The excess does not apply to any child dependant on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Benefits)</b>	<p>For the period specified:</p> <ul style="list-style-type: none"> <li>• 2 years - Cataract and eye lens procedures</li> <li>• 2 years - Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> </ul> <p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul> <p>For the first 6 months:</p> <ul style="list-style-type: none"> <li>• Cardiac and cardiac related services</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Cataract surgery</li> <li>• Renal dialysis</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• IVF and assisted reproductive services</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• IVF and assisted reproductive services</li> <li>• Cosmetic surgery that is not clinically required</li> <li>• Bone marrow transplants</li> <li>• Organ transplants</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 months psychiatric services</li> <li>• 2 months rehabilitation services</li> <li>• 2 months palliative care services</li> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>
<b>Medical Cover</b>	<p>Up to 100% of MBS fee for inpatient services.</p> <p>Up to 100% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.</p>	<p>Up to 100% of MBS fee for inpatient services.</p> <p>Up to 100% of MBS fee as a hospital outpatient or by a doctor or specialist in private practice anywhere in Australia.</p>

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; and holds one single sized bed.

To claim medical benefits for non residents, the Provider must list the MBS item that would be applicable as though the Policy holder was an Australian resident eligible for Medicare.

## Visitors hospital covers at a glance

### Non-working Visa

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

	Mid Visitors Cover	Overseas Student Health Cover/Advantage Overseas Student Health Cover
	Off Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Minimum Benefits for shared room accommodation as set by the Government.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. For Minimum Benefit services, reduced amount equivalent to shared room benefit for Australian resident. Nil benefit for Excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. Shared room accommodation only for Minimum Benefit services. Nil Benefit for Excluded services.</p>
<b>Excess</b>	N/A	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Benefits)</b>	For the duration of this cover: <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	For the duration of this cover: <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	For the duration of this cover: <ul style="list-style-type: none"> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• All cosmetic surgery (including clinically required)</li> <li>• Sterilisation reversal</li> </ul>	For the duration of this cover <ul style="list-style-type: none"> <li>• IVF and assisted reproductive services</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 12 months pre-existing condition</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• 12 months psychiatric and rehabilitation</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 month pre-existing condition of a psychiatric nature (not applicable to Advantage Overseas Student Health Cover)</li> <li>• 12 months for all other pre-existing conditions</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• Waiting periods don't apply when treatment is required as a result of an accident sustained after joining us or you have a condition which is defined under the Emergency Treatment section of the Important Information Guide at <a href="http://bupa.com.au/oshc-info">bupa.com.au/oshc-info</a></li> </ul>
<b>Medical Cover</b>	Up to 100% of AMA Schedule fee for inpatient services. Up to 100% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.	Up to 100% MBS fee for inpatient services. Up to 100% MBS fee as an out-patient by a doctor or specialist in private practice anywhere in Australia.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; and holds one single sized bed.

To claim medical benefits for non residents, the Provider must list the MBS item that would be applicable as though the Policy holder was an Australian resident eligible for Medicare.



## Visitors hospital covers at a glance

### Non-working Visa

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	Short Stay Visitors Cover	Standard Visitors Cover / Standard Plus Visitors Cover
	On Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. For Minimum Benefit services, reduced amount equivalent to shared room benefit for Australian resident. Nil benefit for Excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. For Minimum Benefit services, reduced amount equivalent to shared room benefit for Australian resident. Nil benefit for Excluded services.</p>
<b>Excess</b>	<p>\$250 per hospital admission (including overnight and day services in private and public hospitals).</p> <p>Capped each calendar year at once per adult, when amount has been met in full.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/ day programs.</p>	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Benefits)</b>	<p>For the duration of this cover</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Cardiac and cardiac related services</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover</p> <ul style="list-style-type: none"> <li>• All pre-existing ailments, illnesses or conditions</li> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• All cosmetic surgery (including clinically required)</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• IVF and assisted reproductive services</li> <li>• Cataract and eye lens procedures</li> <li>• Hip and knee replacements including arthroplasty, revisions and resurfacing procedures</li> <li>• Dialysis for chronic renal failure</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• All cosmetic surgery (including clinically required)</li> <li>• Sterilisation reversal</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 12 months psychiatric services</li> <li>• 12 months rehabilitation services</li> <li>• 12 months palliative care</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 12 months pre-existing condition</li> <li>• 12 months psychiatric and rehabilitation</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>
<b>Medical Cover</b>	<p>Up to 100% MBS fee for inpatient services.</p> <p>Up to 100% MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.</p>	<p>Up to 100% of MBS fee for inpatient services.</p> <p>Up to 100% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.</p>

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

Minimum benefits for same day psychiatric/rehabilitation services in a private hospital are only payable where Type C requirements are met, or where a specific contracted psychiatric/rehabilitation benefit exists.

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; and holds one single sized bed.

To claim medical benefits for non residents, the Provider must list the MBS item that would be applicable as though the Policy holder was an Australian resident eligible for Medicare.

## Visitors hospital covers at a glance

### Working Visa

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

	Classic Visitors Cover	Essential Visitors Cover/Essential Plus Visitors Cover
	Off Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Minimum Benefits for shared room accommodation as set by the Government.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. Shared room accommodation only for Minimum Benefits services. Nil benefit for Excluded Services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. Shared room accommodation only for Minimum Benefit services. Nil benefit for Excluded services.</p>
<b>Excess</b>	N/A	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Benefits)</b>	For the duration of this cover: <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	For the duration of this cover: <ul style="list-style-type: none"> <li>• Pregnancy (including childbirth)</li> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	For the duration of this cover: <ul style="list-style-type: none"> <li>• IVF and assisted reproductive services</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	For the duration of this cover: <ul style="list-style-type: none"> <li>• Outpatient psychiatric and psychology benefits</li> <li>• IVF and assisted reproductive services</li> <li>• Bone marrow transplants</li> <li>• Organ transplants</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 months pre-existing conditions relating to psychiatric, rehabilitation and palliative care</li> <li>• 12 months pre-existing conditions except for psychiatric, rehabilitation and palliative care related conditions</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 months pre-existing conditions relating to psychiatric, rehabilitation and palliative care</li> <li>• 12 months pre-existing conditions except for psychiatric, rehabilitation and palliative care related conditions</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>
<b>Medical Cover</b>	Up to 100% of AMA Schedule fee for inpatient services. Up to 100% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.	Up to 100% of MBS fee for inpatient services. Up to 100% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; and holds one single sized bed.

To claim medical benefits for non residents, the Provider must list the MBS item that would be applicable as though the Policy holder was an Australian resident eligible for Medicare.

## Visitors hospital covers at a glance

### Working Visa

This guide is for the use of hospital staff and providers only and does not contain all product information. Please also note this guide is subject to change without notice.

	Gold Visitors Cover/Platinum Visitors Cover	Ultimate Corporate Visitors Cover
	On Sale Product	On Sale Product
<b>Hospital Cover</b>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. Shared room accommodation only for Minimum Benefit services. Nil benefit for Excluded services.</p>	<p><b>Members First &amp; Network Hospitals:</b> Cover for hospital accommodation (including private room) and theatre fees for services that are not Minimum Benefit or Excluded services. Ultimate Corporate Visitors Cover members will be reimbursed if charged a fixed daily fee by any of our contracted fixed fee hospitals/services or have the fee paid directly to the hospital.</p> <p><b>Public Hospitals:</b> Cover for hospital accommodation. Shared room accommodation only for Minimum Benefit services. Nil benefit for Excluded services.</p>
<b>Excess</b>	<p>Nil excess option or \$500 per hospital admission (including overnight and day services in private and public hospitals). Capped each calendar year at once per adult, when amount has been met in full.</p> <p>The excess does not apply to any child dependant covered on the membership.</p> <p>The excess does not apply on admissions for services with a minimum benefit and for approved private hospital ambulatory/day programs.</p>	N/A
<b>Co-Payment</b>	N/A	N/A
<b>Minimum Benefits (Shared Room Benefits)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• Surgery by Podiatrists</li> </ul>
<b>Exclusions (No Benefits Apply)</b>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• IVF and assisted reproductive services</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>	<p>For the duration of this cover:</p> <ul style="list-style-type: none"> <li>• IVF and assisted reproductive services</li> <li>• Procedures not recognised by Medicare or not approved by the Medical Services Advisory Committee and experimental treatment</li> <li>• Cosmetic surgery that is not clinically required</li> </ul>
<b>Waiting Periods</b>	<ul style="list-style-type: none"> <li>• 2 months pre-existing conditions relating to psychiatric, rehabilitation and palliative care</li> <li>• 12 months pre-existing conditions except for psychiatric, rehabilitation and palliative care related conditions</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>	<ul style="list-style-type: none"> <li>• 2 months pre-existing conditions relating to psychiatric, rehabilitation and palliative care</li> <li>• 12 months pre-existing conditions except for psychiatric, rehabilitation and palliative care related conditions</li> <li>• 12 months pregnancy (including childbirth)</li> <li>• No waiting period for accidents sustained after joining (provided admission is within 180 days of the accident and that treatment was initially sought within 72 hours of the accident)</li> </ul>
<b>Medical Cover</b>	<p>Up to 100% of AMA Schedule fee for inpatient services.</p> <p>Up to 150% of MBS fee as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.</p>	<p>100% of cost for inpatient services.</p> <p>100% of cost as a hospital out-patient or by a doctor or specialist in private practice anywhere in Australia.</p>

Excess applies to in-patients only.

Please note there is a small number of Network hospitals that may charge a fixed daily fee for some services. This fixed daily fee is capped at a maximum number of days for inpatient stays but is uncapped for day programs.

Surgically implanted prostheses up to the approved benefit in the Government's Prostheses List.

A small number of non PBS drugs are not covered — contact Bupa pharmacy advisor [pharmacy@bupa.com.au](mailto:pharmacy@bupa.com.au)

The definition of "Private Room" applying from 1 June 2017 means, for the purposes of a private room in a public hospital, a room in a hospital which: is purpose built and suitable for no-one other than a single admitted adult patient; and holds one single sized bed.

To claim medical benefits for non residents, the Provider must list the MBS item that would be applicable as though the Policy holder was an Australian resident eligible for Medicare.

## Bupa membership cards

The following membership cards should be recognised at your hospital or practice.

When HBA, MBF and Mutual Community were re-branded as Bupa, members would have received one of these cards.

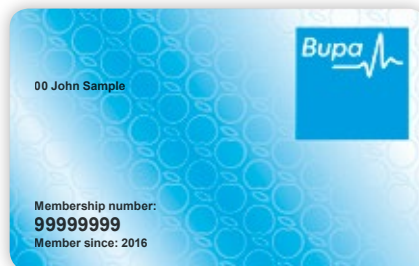
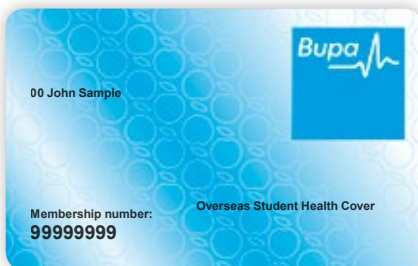
However, some members may still present an HBA, MBF or Mutual Community card and some of these cards may contain obsolete product names. To provide our members with affordable health insurance, after becoming Bupa we generally did not send out additional new cards to reflect changes to product names. Refer within the guide for renamed products. As long as the membership number is current and the member is financial, the old cards will work.

If members would like to order a new card they should contact us or log in to myBupa.



## OSHC and OVC Bupa membership cards

The following membership cards should be recognised at your hospital or practice.



From 2014, Bupa no longer prints the name of the cover on membership cards. If a membership card was issued to a member before this date then their card will have printed on the front their level of cover. If they have been issued or re-issued with a card after this date then their level of cover will not be printed on the front of their card.

## Bupa global membership cards

Bupa Global members are covered by Bupa Australia hospital contracts.

### Bupa global health insurance

Bupa Australia is part of the worldwide health and care specialists, BUPA.

Bupa Global provides health insurance to expatriates living and working in other countries, including Australia.

Members with the following cards are covered by Bupa Global:

- Bupa Global
- Bupa Global Middle East (BGME)
- Bupa Hong Kong
- Bupa Latin America
- Bupa Thailand
- IHI Bupa
- Max Bupa
- Sanitas (Bupa) Spain
- USA Medical Services Corporation

Bupa Global offers the following products:

- Bupa Global Health Plans
- Bupa Global Gold with dental
- Bupa Worldwide Health options
- Corporate bespoke plans
- Company Gold Superior
- IHHP (International Health Hospital Plan)
- ISM (International Swiss Medical)
- Lifeline Classic
- Lifeline Essential
- Lifeline Gold

Bupa Australia administers overseas visitors cover and overseas student health cover insurance products issued or underwritten by other entities for, respectively, overseas visitors and overseas students. Persons holding valid products are eligible for treatment.

## Bupa global membership cards

The following global membership cards should be recognised at your hospital or practice.





## Pre-authorisation hospital checks for Bupa global members

A pre-authorisation hospital check for Bupa Global members is required via fax or email with the form downloaded from the following website:

<http://www.bupa-intl.com/partner/for-providers>

Alternatively you can call the Bupa Global Helpline. Please see below for details.

### Contact information for Pre-Authorisation:

Bupa Global  
Tel: +44 1273 333911  
Fax: +44 1273 866301  
Email: [pre-authorisation@bupa-intl.com](mailto:pre-authorisation@bupa-intl.com)

ihi Bupa  
Tel: +45 33 15 33 00  
Fax: +45 33 32 25 60  
Email: [emergency@ihi.com](mailto:emergency@ihi.com)

Note: Helpline operates: 24 / 7 / 365 days a year

For general enquiries to the Provider Services Department, they may be contacted via:

[providerservices@bupa-intl.com](mailto:providerservices@bupa-intl.com)

If you need to pre-authorise treatment for a member of Bupa Latin America, please contact USA Medical Services on:

Tel: +1 305 275 1500, for USA  
Tel: +1 800 726 1203, free of charge from USA

Whenever a patient requires day-case or inpatient treatment, please contact us as per the above with the following information:

- Medical records
- Symptoms
- Diagnosis
- Procedure
- Admission and discharge date

On receipt of the above information, the request will be reviewed and response given:

- If requested by telephone: immediate response
- If requested by email or fax: response within 72 hours

Please note that in case of an emergency admission always contact the 24 hour helplines.

### Hospital Services for Bupa Global Members:

Where a Bupa Global member attends a Members First or Network Hospital/Day Facility for a service Covered under the Bupa Australia Agreement, the Bupa Global member should be billed under the terms and conditions of the Bupa Australia Agreement.

Hospital Claims for Bupa Global Members should be sent to Hospital Claims, GPO Box 990, Adelaide, SA, 5001.





## For more information:

### Hospital use

To ensure a timely response to your enquiry, please contact the correct department for assistance.

#### Pre-Admission patient eligibility checks:

To verify a membership, hospitals can check Bupa Australia entitlement via the online eligibility system through Eclipse. This system is available 24/7.

Membership Checking – <https://eclipse.civica.com.au/ECFWeb>

If this system is unavailable due to system issues at Bupa Australia or Medicare then EMERGENCY checks can be done via telephone to Contact Centre on 134 135 (Current hours 8.30am to 5.00pm EST Monday to Friday only).

#### Post-Admission hospital claims enquiries:

Department: Hospital Claims Department

For: Queries regarding a benefit received following hospitalisation

Email: [hospitalclaims@bupa.com.au](mailto:hospitalclaims@bupa.com.au)

Tel: 1300 663 590

Hours availability: 8.30am – 5.00pm EST Monday to Friday

### Drs Rooms use

For queries regarding payment of a medical claim please ring: 134 135 (choose the provider option 3, followed by option 3 and another option 3)

Email: [dr.billing@bupa.com.au](mailto:dr.billing@bupa.com.au)

## The World of Bupa

Health Cover  
Health Coaching & Programs  
International Health Cover  
Corporate Health Solutions  
Optical Products & Services  
Dental Services  
Aged Care  
Medical services  
Travel, Home & Car Insurance  
Life Insurance  
Pet Insurance

Bupa HI Pty Ltd  
ABN 81 000 057 590

Effective 30 September 2017  
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